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RURAL DISTRICT OF MERE & TISBURY



Annual Report

of

The Medical Officer of Health

incorporating

The Report



of

The Chief Public Health Inspector



FOR THE YEAR 1959

RURAL DISTRICT OF MERE AND TISBURY

ANNUAL REPORT
of
THE MEDICAL OFFICER OF HEALTH

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THE REPORT
of
THE CHIEF PUBLIC HEALTH INSPECTOR

For the Year 1959

RURAL DISTRICT OF MERE AND TISBURY
ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH
INCORPORATING THE REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR
FOR THE YEAR 1959

To the Chairman and Councillors of the Rural District of Mere and Tisbury.

I have the honour to present the Annual Report on the public health of the District during 1959. The report follows the recommendations of the Ministry of Health in Circular No. 1, 1960. It is satisfactory to note the altered wording, for this year, of this annual circular. This now removes whatever doubt there might have been in the past about the scope of the Report. The Public Health Officers Regulations, 1959, are referred to in this Circular which draws attention to the provision in the Regulations for the Medical Officer of Health to comment on any matter which he **thinks** desirable in relation to the public health in this area.

The Report of the Chief Public Health Inspector, Mr. H. Sharratt, is incorporated, and provides detailed information in regard to environmental public health in the district.

I wish to record my appreciation of the assistance and co-operation of the staff of the Public Health Department, particularly Mr. Harry Sharratt, and of my colleagues in other departments of the Council. I also thank most gratefully my colleagues, the local General Medical Practitioners and Health Visitors and Dr. Peter Wormald, Director of the Salisbury Public Health Laboratory, for their invaluable and friendly co-operation.

I have the honour to be,

Your obedient Servant,

F. JOHN G. LISHMAN

Medical Officer of Health

8th August, 1960.

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INTRODUCTORY SUMMARY

Special attention is drawn to the following sections of the Report:

1. In the "Vital Statistics" Section :-

The "standardized" general death rate of 9.6 per 1,000 is slightly higher than for last year, but lower than the rate for England and Wales, (11.6). Nearly two thirds of it was due to diseases of the heart or circulation.

The "nil" maternal mortality rate.

The infant mortality rate of 17.8 per 1,000 live births, considerably lower than last year's rate of 26.3, and also lower than the National Rate of 22.0.

The tuberculosis mortality rate of NIL.

2. In the "Communicable Disease" Section :-

The District was generally fortunate in having a general low incidence of notifiable communicable diseases, except for measles.

The respiratory tuberculosis notification rate fell again from 0.5. per 1,000 in 1957 and 0.25 per 1,000 (3 cases only), in 1958 to 0.1 per 1,000 (1 case only).

Preventative "immunisation" of children against diphtheria and whooping cough and against small pox still falls short of the desired extent, though there is a considerable improvement. Immunisation against Poliomyelitis has continued on an increasing scale.

3. In the "Environmental Public Health and Food" Section :-

Comments on the water supplies and on the progress of the Comprehensive Water Scheme, its impending incorporation into the regional scheme of the West Wilts Water Board, are made, also notes about deficiencies in sewage disposal arrangements in Mere and East Knoyle and lack of suitable drainage or sewage disposal in other parts. The desirability of an adequate fluoride content in drinking water is again referred to, to safeguard the formation of strong dental enamel.

In Housing, in spite of the substantial amount of work done by the Council in providing Council Houses, there is still a real need for more housing accommodation for people at present without their own accommodation, plus a much small number of people who are now living in worn out or insanitary buildings in the "condemned" class. The number of families on the waiting list for housing by the Authority decreased

only slightly during the year from 166 to 150 (64 of which are considered "urgent"). Yet the need to conserve every acre of good agricultural land is increasingly paramount for the helth and welfare of this country.

THE MAIN PUBLIC HEALTH NEEDS IN A NUTSHELL - These remain as previously:

1. More Homes, with the minimum encroachment upon agricultural land.
2. Enrichment of fluoride-weak drinking water supplies, to enable teeth to grow healthy and be durable.
3. Less tobacco smoking.
4. Concluding of the nearly completed comprehensive main water supply scheme to all parishes.
5. Better sewage disposal for Mere.

STAFF OF THE PUBLIC HEALTH DEPARTMENT

Medical Officer of Health: F. J. G. LISHMAN, M.D. (Hygiene), B.S. (London), D.P.H. (London), L.R.C.P., M.R.C.S., D.L.O. (England), L.M.C. (Canada).

Address: Office - 26 Endless Street, Salisbury (Tel. 5201)

Residence: "Over-the-Hill", Berwick St. James. (Tel. Stapleford 269)

Chief Public Health Inspector : H. SHARRATT, M.A.P.H.I.

Public Health Inspector: J. C. PICKUP, M.A.P.H.I.

Technical Assistant J. W. CROWTHER

Clerk : (Mere Office): Mrs. J. M. LAMPARD

Clerk : (Salisbury Office M.O.H.) : Miss G. Parsons (resigned October 1959)
Miss R. DARE

The Medical Officer of Health also holds appointments as Medical Officer of Health for the Salisbury and Wilton Rural District, and for the Borough of Wilton, and, under arrangements made in 1954, acts as Assistant County Medical Officer for the Wiltshire County Council. (Approximately two elevenths of the Salary for the Joint Appointment is allocated to the Mere and Tisbury Rural District Council.)

The Public Health Inspectors also hold appointments as Surveyors, 84% of salary for the dual appointments being allocated to Public Health Inspectors' duties. I believe that this arbitrary allocation is somewhat on the high side.

GENERAL ADMINISTRATION DURING THE YEAR

There is nothing to add to the observations made under this section in my Reports for 1957 and 1958.

GENERAL STATISTICS

Number of Parishes	..	..	..	..	..	..	..	..	26
Area in Acres	..	..	..	..	..	..	..	..	71,319

Population, 1951 Census	..	..	..	..	..	..	..	..	11,450
Population, Registrar General's Estimate for mid Year									11,250
Density of population - people per acre	..	..	..	..	..	..	..	..	0.16
Number of inhabited houses or flats	..	..	..	..	..	..	..	..	3,697
Number of applications for Council Housing at end of the year, on waiting list	..	..	..	..	..	..	..	..	150
									(64 of which are considered urgent)
Rateable Value	..	..	..	..	..	..	..	..	£100,002
Product of a penny rate (31.3.1959)	..	..	..	..	..	..	..	..	£379. 1. 6

VITAL STATISTICS

In accordance with the request of the Ministry of Health additional vital statistics of infants and mothers have been recorded and the pre 1958 Tables I and III recast into an enlarged Table I.

TABLE I

BIRTHS, INFANT MORTALITY AND MATERNAL MORTALITY

					Male	Female	Total	
Live Births	Legitimate	84	77	161
					Illegitimate	2	6	8
					Total	86	83	169
Crude Live Birth rate per 1,000 population	..							15.0
Comparability Factor for Births					1.14
Standardized Live Birth Rate					17.1
					Male	Female	Total	
Still Births	Legitimate	1	2	3
					Illegitimate	0	1	1
					Total	1	3	4
Total Live and Still Births	..	..	..	..	87	86	173	
Still Births, rate per 1,000 Live and Still Births								23.2.
					Male	Female	Total	
Infant deaths	,	,	,	,	Legitimate	0	3	3
					Illegitimate	0	0	0
					Total	0	3	3

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Infant Mortality rate per 1,000 Live Births			

Legitimate \ddagger	..	..	17.8
Illegitimate \ddagger	..	..	0
Total	..	..	17.8

For Comparison: I.M.R. England & Wales (Same year)	..	..	22.5
I.M.R. Wiltshire (previous year)	..	..	18.6

Neo Natal (In first four weeks) Deaths	<u>Male</u>	<u>Female</u>	<u>Total</u>
Legitimate	0	1	1
Illegitimate	0	0	0
Total	0	1	1

Neo Natal Mortality Rate	5.9
--------------------------	----	----	----	----	----	-----

Perinatal (in first week) deaths

Legitimate	1
Illegitimate	0
Total	1

Perinatal Mortality Rate	5.9
--------------------------	----	----	----	----	----	----	-----

Illegitimate Live Births per cent of Total Live Births	..	5.0
--	----	-----

Maternal Deaths (including Abortion	0
-------------------------------------	----	----	----	----	---

Maternal Mortality Rate per 1,000 Live and Still Births	..	0
---	----	---

\ddagger Legitimate I.M.R. =
$$\frac{\text{Leg. deaths under 1 year}}{\text{Leg. live births}}$$

\ddagger Illegitimate I.M.R. =
$$\frac{\text{Illeg. deaths under 1 year}}{\text{Illeg. Live births}}$$

* Comparability Factor for Births

(This "standardizes" or compensates for age and sex distribution of the local population so that the adjusted birth rate can be compared with the rate for England and Wales, and with similarly adjusted birth rates in other areas)

Comment

The Registrar General's estimate of mid-year population of the Rural District shows a slight rise, but the birth rate has dropped one point. The five previous years' "standardized" birth rates were 18.5 (1958), (1954) 18.8, (1955) 15.6, (1956) 17.3, (1957) 16.5, as compared with 17.1 for last year. The Infant Mortality Rate is a little less than last year, and is still lower than the national average. But the relatively small numbers of births and deaths in a small population makes the calculated

rate subject to a big chance factory. Each single death makes a difference of 6 in the I.M.R.

TABLE II
DEATHS AND DEATH RATES

	<u>Males</u>	<u>Females</u>	<u>Total</u>
Number of Deaths	76	49.	125
Crude Death Rate per 1,000 population			11.1
Comparability Factor for Deaths			0.86

Comment

This factor, being substantially less than unity, indicates that the age distribution of the local population is more elderly than that of the country as a whole. Its application makes the local "crude" rate comparable with that of the country, and with similarly adjusted rates from other localities.

Death Rate as standardized by Comparability Factor		9.6.
Death Rate for England and Wales for comparison		11.6
Death Rate for Wiltshire (standardized) (previous year)		10.5

Comment

Both the "crude" and "standardized" Death Rates for the Rural District are again slightly raised, (again on the male side). But the standardized rate is still lower than the national figure this year. Last year's local figure (standardized) was 8.8.

NATURAL INCREASE

Increase of Live Births over deaths for the year		44
Rate of Natural Increase, per 1,000 of population		3.5

TABLE III

Certain "Specific" Death rates in Inverse "Health Index" Value
(Rates per 1,000 population, except for maternal rate)

(1) Deaths due to Tuberculosis (all forms) (both sexes) .. .. ..	..	..	..	0
Tuberculosis Death Rate				0
Deaths due to Respiratory Tuberculosis				0
Respiratory Tuberculosis Death Rate				0
Previous year's Respiratory Tuberculosis Death Rate, Wiltshire for comparison				0
Previous year's Respiratory Tuberculosis Death Rate, England & Wales for comparison				0.11

(2)	Maternal Deaths (Due to Pregnancy, Childbirth or Abortion) ..	0
	Maternal Mortality Rate - per 1,000 live and still births ..	0
	Previous year's Maternal Mortality Rate (Childbirth, Abortion, Pregnancy) Wiltshire for comparison	0
(3)	Deaths from Cancer and Related Malignant Diseases ..	21
	Deaths from Lung Cancer	4
	Specific Death rate from Cancer	1.8
	Specific Death rate from Lung Cancer	0.35
	Previous year's death rate from Cancer, England and Wales ..	2.12
	Previous year's Death Rate from Cancer (all forms) Wiltshire ..	1.75
	Previous year's Death Rate from Lung Cancer, Wiltshire ..	0.35
(4)	Deaths from Heart Disease and other diseases of the circulatory system	76
	(Coronary Disease only	13)
	Specific Death Rate from Heart Disease and other diseases of the circulatory system	6.7
	(Coronary Disease only	1.2)
(5)	Deaths from Accidents and Violence	2
	Specific death rate from Accidents and Violence	0.18

Comment

Certain of the specific "index" mortality rates are analysed, or broken down, in the following Table IV. On the whole these "inverse indices" of the state of health of the community are satisfactory. All are on the low side except the rate for "heart disease and other diseases of the circulatory system" which constitutes nearly two thirds of the total death rate of the district. Special attention is drawn to the "nil" specific death rate from Tuberculosis and the "nil" rate from pregnancy, child birth or abortion (Maternal Mortality). Both these statistics are very encouraging.

ANALYSIS OF DEATHS BY CAUSE

The Registrar General provides for each district each year an analysis of deaths according to cause, broken down into thirty-six disease headings. These headings lend themselves to a considerable extent to "grouping" the causes of death together in "families" or types of disease related to each other, study of the trends in which may be of interest or value in regard to the particular population concerned. Advantage has therefore been taken of this opportunity to break down the Registrar General's annual table for this district into seven groups, labelled "A" to "G" as set out in Table IV.

TABLE IV - ANALYSIS OF CAUSES OF DEATH

Group A - Certain Communicable Diseases	Male	Female	Total	Rate per 1,000
1. Tuberculosis - Respiratory	0	0	0	0
2. Tuberculosis - Other	0	0	0	0
3. Syphilitic Disease	2	0	2	0.18
4. Diphtheria	0	0	0	0
	—	—	—	—
Carried forward	2	0	2	0.18

			Male	Female	Total	Rate per 1,000
	Brought forward		2	0	2	0.18
5.	Whooping Cough	.. .. .. ..	0	0	0	0
6.	Meningococcal Infections	.. .. ..	0	0	0	0
7.	Poliomyelitis	.. .. .. ..	0	0	0	0
8.	Measles	.. .. .. ..	0	0	0	0
9.	Other Infectious and Parasitic Diseases (other than Influenza and Pneumonia)		0	0	0	0
	Total Group A		2	0	2	0.18

Group B - Cancer and related Malignant Diseases

10.	Malignant Neoplasm - Stomach	.. ..	1	0	1	
11.		Lung or Bronchus	4	0	4	0.35
12.		Breast	.. ..	0	1	1
13.		Uterus	.. ..	0	0	0
14.	Other Malignant or Lymphatic Neoplasm		10	4	14	
15.	Leukaemia or Aleukemie	0	1	1	
	Total Group B		15.	6	21	1.8

Group C - Diabetes

16.	Diabetes		0	0	0	
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Group D - Heart and Other Diseases of Circulatory System

17.	Vascular Lesions of Nervous System		10	11	21	
18.	Coronary Disease or Angina	.. ..	9	4	13	
19.	Hypertension with Heart Disease	.. ..	3	2	5	
20.	Other Heart Diseases	.. .. ..	19	15	34	
21.	Other Circulatory Diseases	.. ..	3	0	3	
	Total Group D		44	32	76	6.7

Group E - Respiratory Disease (Other than Tuberculosis)						Male	Female	Total	Rate per 1,000
22. Influenza	..	..	..	..	..	4	2	6	
23. Pneumonia	..	..	..	..	..	1	0	1	
24. Bronchitis	..	..	..	..	..	3	2	5	
25. Other Diseases of Respiratory System						0	0	0	
Total Group E						8	4	12	1.1

Group F - Miscellaneous

26. Ulcer of Stomach and Duodenum	..					1	0	1	
27. Gastritis, Enteritis and Diarrhoea						0	1	1	
28. Nephritis and Nephrosis	..	..				0	0	0	
29. Hyperplasia of prostate	..	..				1	0	1	
30. Pregnancy, Childbirth, Abortion	..					0	0	0	
31. Congenital Malformation	..	..				0	2	2	
32. Other Defined and Ill-Defined Diseases						4	3	7	
Total Group F						6	6	12	1.1

Group G - Accidents and Violence

33. Motor Vehicle Accidents	..	..				0	1	1	
34. All other accidents	..	..	..			0	0	0	
35. Suicide	..	..	..	..	..	1	0	1	
36. Homicide and operations of war	..					0	0	0	
Total Group G						1	1	2	0.18

37. ALL CAUSES	76	49	125	11.1
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Comment on Table IV

Diseases of the Heart and Circulatory System, as usual the most common cause of death in this district (rate 6.7 per 1,000) have substantially increased, and amount to nearly two thirds of the total number of deaths. They remain the greatest (and perhaps most merciful) fatal endemic affecting the district.

Cancer and related malignant conditions have again also increased, and account for nearly a sixth of the death rate. Cancer of the lungs or bronchi has been the greatest single type of Cancer in 1955, 1956, 1957, 1958 and again in 1959, when as in 1958 it was entirely confined to males. This is of special interest in view of the known association between heavy smoking and lung Cancer. From the communicable diseases classed in Group A there were two deaths only, both from the late effects of Siphilitis. There were only two deaths from accidents and violence. The low death rate from Tuberculosis (all forms) is comforting, especially as there was only one new case of tuberculosis notified during the year, the most encouraging combination of infectious disease statistics for many years.

Lung Cancer

In 1957 I submitted a special report on Lung Cancer and Tobacco Smoking, and I referred to this, and to a table of statistics for Wiltshire, prepared by the County M.O.H., Dr. C. D. L. Lycett, in my 1957 Annual Report. What was said then still stands, with further evidence to support it.

(Please see Page 17, Section 8, of 1957 Annual Report).

COMMUNICABLE DISEASES

A. Prevention of Communicable Diseases

The measure of the extent to which people are immunised against communicable diseases in a district has become one of the "indices" of the health of the community. "Artificial" immunisation against certain diseases amenable to prevention or attenuation by this method is now available for a number of communicable diseases, which number increases every few years. As long as this method of protection against specific communicable diseases is not allowed to obscure the wider, general measures for the promotion of health - good nutrition, housing, education, interesting occupation and creative use of leisure time - its gradual development and multiplication is all the good. The longest established, and, so far, most proven successful and lasting, artificial immunisations are those against small pox and diphtheria. In more recent years protection against whooping cough (partial) and against poliomyelitis have been accepted as normal practice. For Wiltshire, the Wiltshire County Council, as Local Health Authority under the National Health Service, operates in this district a scheme for protection against these four diseases. Smallpox immunisations are done by the "Family Doctors" under the National Health Service, for the County Council, the other immunisations either by the "Family Doctors" or by the County Council's Medical Officers at Child Health Clinics or at specially held immunisation clinics, usually arranged at school or village halls. Poliomyelitis immunisation, using parenteral inoculation, begun during 1956, was greatly increased in subsequent years, now being made available for people up to 40 years old. Most of these inoculations are done by

County Council Medical Staff, including myself, though certain General Medical Practitioners also undertake this work. In this area, all the immunisations are still carried out by doctors, the practice of employing public health nurses (health visitors, or especially experienced nurses) in this work not yet having been adopted. Tetanus immunisation had not begun (except by N.H.S. doctors' prescription) by the end of the year, but at the time of writing had been introduced.

I am indebted to Dr. C. D. L. Lycett, County Medical Officer of Health for Wiltshire, for the following figures concerning artificial immunisation work carried out during the year, against diphtheria, smallpox, whooping cough and poliomyelitis in the district

TABLE V - IMMUNISATION STATISTICS

IMMUNISATION STATISTICS
(A & B) DIPHTHERIA AND WHOOPING COUGH

Age Group		Under						5-9	10-14	Total Under 15
		1	1	2	3	4				
Primary imms. completed during 1959	Diph.	140	20	11			11	-		182
	Wh/c.	143	18	10			2	-		173
Reinf. injs. administered during 1959	Diph.	-	-	22			57	3		82
	Wh/c.	-	-	20			8	2		30
Total immunised child population at 31st Dec. 1959	Pre 1.1.55.	-	-	-			253	756		1,009
	Post 1.1.55.	56	150	126	128	143	549	149		1,301

(C) SMALLPOX

Age Group	Under 1						5-14	15 or over
	1	2-4	5-14	15 or over	1	2-4		
Primary Immunisations		108			5	3	3	2
Re-Immunisations		-			-	1	7	23

(D) POLIOMYELITIS

	All Ages
Partially Immunised (2 injections to date)	721
Three injections	1,270

Comment

The precise number of children under 15 years old in the district is not known (except at census times) but in a population of average age-distribution and average birth and death rates, we must expect population, of age birth to 14 full years (under fifteen) of about one-fifth or 20% of the total "all age" population. Mere and Tisbury Rural District usually has a slightly higher birth rate and lower death rate than the national average so one can safely assume that at least one-fifth of the total estimated population of 11,230 are children under 15. On the basis of this estimate there would be at least 2,250 children under 15 in the district and the total of 2,310 children under 15 immunised against diphtheria at some time is therefore excellent. A proportion of these are also immunised against whooping cough. But still an insufficient proportion of children were immunised against diphtheria during their first year of life, (as in previous years), 140 children as compared with 169 live births.

Table V shows up a poor position in regard to smallpox immunisation (so-called "Vaccination") for though 108 children under age 1 were immunised the total "Vaccinations" and re-"Vaccinations", added together for all other ages, only amounted to 44. In these times, when the speed of air travel allows people infected with smallpox abroad to keep well on the journey but develop the disease after arrival in this country, instead of on a ship, the low level of protection against smallpox, as recorded in recent years, in this District is disturbing. It would be less so if the same requirements in regard to immunisation against smallpox, before making the journey, as apply to entry into most countries, were put into force for entry into Great Britain.

At the time of writing this report, in 1960, the County Council have just made "triple antigen" for combined immunisation against Diphtheria, Whooping Cough and Tetanus, available. Previously this was only available on N.H.S. prescriptions, or privately, I have advocated this measure regularly in my annual reports, and elsewhere, for this largely agricultural district. During the year there was a severe and very nearly fatal case of tetanus in a young Mere girl.

B. Incidence of Communicable Diseases

The communicable diseases for which statistics are available comprise only those diseases which are compulsorily "notifiable", under the Public Health Act 1936, or the various Regulations which are operative. A proportion of these notifiable diseases does not get notified because although legally the head of the family is responsible for notifying the Medical Officer of Health, in practice notification is rarely made unless a doctor attends, and he then makes the notification.

The notifiable communicable diseases actually notified during the year are set out in Table VI.

The year was remarkable for an extremely low incidence of all kinds of notifiable disease, except for measles, and even this was much less frequent than usual. No cases of notifiable "food poisoning" were notified.

But it is important to note that certain common communicable diseases such as influenza, rubella and mumps and also venereal disease, because they are not generally "Notifiable", cannot be included in this table, in which are recorded only those cases of diseases which are notifiable and are actually notified. Also, not all cases of notifiable diseases can be included, for many minor cases may never have a doctor called to them and therefore do not get notified to the Medical Officer of Health. It is likely that a number of mild cases of whooping cough, for example, may occur but not be notified.

It must now be appreciated that, as a cause of epidemic disease, heart, cancerous and respiratory diseases have replaced the old idea of "infectious disease" as prime epidemic culprits. Public Health workers have now to tackle this great trio of killers with the same energy as they used to tackle the now weakening group of "communicable" diseases. The effort to persuade people to reduce tobacco smoking is one example of modern epidemiology in the public health service.

This year there was only one notified case of Tuberculosis (respiratory).

TABLE VI
NOTIFIABLE DISEASES NOTIFIED DURING THE YEAR

		Sub	Total	Group
			(main disease)	Total
1. <u>Tuberculosis</u>				
(a) Respiratory	.. .. ..	1		
(b) Meninges and Nervous system	.. .. ..	0		
(c) Other forms	.. .. ..	0		
(d) Group Total	.. .. ..			1
2. <u>Other Respiratory Notifiable Diseases</u>				
(a) Whooping Cough	.. ..	2		
(b) Pnemonia Acute	.. ..	3		
(c) Group Total	.. .. ..			5
3. <u>Diphtheria</u>	.. .. .. ..	0		0
4. <u>Meningococcal Infection</u>	..	0		0
5. <u>Virus Diseases of Nervous System</u>				
(a) Poliomyelitis - Paralytic	..	0		
(b) Poliomyelitis - Non-Paralytic	..	0		
(c) " - Total	..	0		
(d) Encephalitis - Infective	..	0		
(e) Encephalitis - Post-Infectious	..	0		
(f) " - Total	..	0		
(g) Group Total	.. .. ..			0

		Sub	Total (main disease)	Group Total
6.	<u>Other Notifiable Virus Diseases</u>			
(a)	Measles (excluding Rubella)	..	31	
(b)	Smallpox .. .. .. ..	..	0	
(c)	Group Total .. .. .. ..	..		31
7.	<u>Alimentary Infection or Poisons</u>			
(a)	Dysentery - Bacterial	2		
(b)	Dysentery - Other	0		
(c)	" - Total	2		
(d)	Typhoid Fever	0		
(e)	Paratyphoid Fever	0		
(f)	Food Poisoning	0		
(g)	Group Total	2		
8.	<u>Streptococcal Group</u>			
(a)	Scarlet Fever	3		
(b)	Erysipelas	4		
(c)	Group Total	7		
9.	<u>Miscellaneous Groups</u>			
(a)	Puerperal Pyrexia	1		
(b)	Ophthalmia Neonatorum	0		
(c)	Other Notifiable Diseases ..	0		
(d)	Group Total	1		
10.	All "Notifiable Diseases	Total		47

TABLE VI (a)
FOOD POISONING

(Salmonella Infections that are not considered to be food borne are not included under items (2), (3) or (4), but are shown separately under item (5).

2. (a) FOOD POISONING NOTIFICATIONS (Corrected) AS RETURNED TO REGISTRAR GENERAL

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL
0	0	0	0	0

(b) CASES OTHERWISE ASCERTAINED

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL
0	0	0	0	0

(c) SYMPTOMLESS EXCRETORS

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL
0	0	0	0	0

Note: Symptomless excretors are not regarded as cases.

(d) FATAL CASES

1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL
0	0	0	0	0

3. PARTICULARS OF OUTBREAKS

Agent	No. of outbreaks		No. of Cases		Total No. of Cases
	Family outbreaks	Other outbreaks	Notified	Otherwise ascertained	
Agent identified:					
(a) Chemical Poisons (Type to be stated)					
(b) Salmonella (Type to be stated)					
(c) Staphylococci (including toxin)	NIL	NIL	NIL	NIL	NIL
(d) Cl. botulinum					
(e) Cl. welchii					
(f) Other bacteria (to be named)					
Totals	0	0	0	0	0
Agent not identified	0	0	0	0	0

4. SINGLE CASES

AGENT	No. of Cases		Total No. of Cases.
	Notified	Otherwise ascertained	
Agent identified:			
(a) Chemical Poisons (type to be stated)			
(b) Salmonella (type to be stated)			
(c) Staphylococci (including toxin)		NIL	
(d) Cl. botulinum			
(e) Cl. welchii			
(f) Other bacteria (to be named)			
Agent not identified	0	0	0

5. SALMONELLA INFECTIONS, NOT FOOD-BORNE

Salmonella type	Outbreaks		No. of cases (outbreaks)	Single cases	Total No. of cases (out- breaks and single cases)
	Family	Other			
			NIL		
Totals	0	0	0	0	0

Comment

This table is a return required by the Ministries of Health, and of Agriculture, Fisheries and Food, so is included in this Report in spite of it being, very happily, a "nil" return. There were only 2 known, notified, cases of "Food Poisoning" during 1955 and none in 1956, 1957 and 1958.

PERSONAL HEALTH SERVICES

Apart from the general medical, dental, specialist and hospital services of the National Health Service, the other personal Health Services for the Rural District are operated by the Wiltshire County Council. Among these are the Health Visiting Service, Midwifery Service, Home Nursing Service, Home Help Service, Ambulance Service, the Child Health Clinics and the School Health Service, with its specialised auxiliary services such as Speech Therapy and Guidance Clinics. The County Council are also responsible for the Mental Health Service (outside hospitals) and the "Care and after-Care" service, which is largely concerned with tuberculous people, their families

and other contacts, and with "Chronic Sick" and aged people, outside hospitals.

Since 1954, the Medical Officer of Health spends nearly half his day-time working hours (Mondays to Fridays only) working simultaneously for the County Council, principally with the School Health Services at Child Health Clinics and at Immunisation Clinics, also undertaking a considerable amount of mental health work. For further information in regard to these services reference should be made to the Annual Reports of the Principal School Medical Officer and of the County Medical Officer of Health for Wiltshire.

In the Mere and Tisbury Rural District, most of the Medical Officers for the Maternity and Child Health Clinics are General Medical Practitioners working sessionally, but I attend the Clinic at East Knoyle, with Miss M. Coleman, Health Visitor, and I should like to pay special tribute to the wonderful voluntary help given to the clinic throughout the year, by Miss Green (Hon. Secretary), Mrs. Barnes, also a group of other ladies who attend on a rota basis, so that there is always one available for issuing Welfare Foods, and two others to deal with the registers. This clinic serves a widely scattered district, and it is not always easy for mothers to reach it with their babies, regularly. At times the attendance has fallen to a degree that has made the County Council consider its discontinuation, but with such good premises and such excellent and freely given voluntary help, that would be a great pity.

Handicapped Children

The School Health care, and special educational needs, of handicapped children also comes under the Wiltshire School Health Services.

School Premises

The hygiene of School Premises, as of most other buildings, concerns the Local Public Health Authority as well as the Education Authority, and school premises are inspected by your Medical Officer of Health in his capacity as such, and also as School Medical Officer. A number of recommendations for improvements in school premises, fittings and sanitary arrangements, for improving hygienic conditions, were made during the year, special attention being paid to the dish and utensil washing facilities in the services for school meals. A major improvement was carried out during the year at Kilmington School, with new kitchen-scullery, pupils' and teachers' indoor sanitary offices with hot water and water carriage. But there is still no room suitable for a medical inspection, which must be done either in the scullery, which being separated from the classroom only by a roller screen, far from sound proof, is difficult, - or in the teacherage.

The coming into operation at the end of 1955 of the Food Hygiene Regulations 1955 brought about considerable improvement in these meal facilities, and set new standards of conduct for personnel. New schools

on larger sites are urgently needed to replace the old secondary modern school at Mere and the Secondary Modern section of the mixed school at Tisbury. Building of the new Secondary Modern School at Tisbury is however now beginning.

Handicapped Adults

The Social care of handicapped adults, including the blind and deaf, and of old people, comes under the County County services. But the Local Authority has obligation in regard to their housing, and certain powers, under Section 47 of the National Assistance Act. The Local Authority has also delegated some of its power, as permitted by the National Assistance (Amendment) Act, 1951, to the Medical Officer of Health, to act on his own authority in emergency, for a period of up to one month's detention in hospital, or a home.

The Medical Officer of Health saw a number of old people, to a greater or less extent needing care and attention with a view to action under the Act. In all except two cases however, removal to an institution was either unnecessary, or if necessary, was arranged for voluntarily, either by the person applying to the County Council Welfare Department, or the family doctor making arrangements for admission to hospital. In two cases however, compulsory powers had to be used.

In some cases, representations to the hospital admission authorities by the Medical Officer of Health, indicating that he would have had to obtain a magistrate's order for the patient's admission, but that the patient agreed to go voluntarily, resulted in a bed being given by the hospital, when previously the General Medical Practitioner had been unable to obtain one.

ENVIRONMENTAL PUBLIC HEALTH AND FOOD

This is still probably the most important of the various factors which influence public health.

As stated in previous Annual Reports and repeated because of its basic importance, human health is still greatly influenced by the environment (including housing) and the extent to which man can adapt this to suit his needs. Health is also largely dependent upon the quantity and quality of food supplies. Fundamental to good health are such influences as housing, a water supply containing the necessary impurities for promoting health but free from harmful bacteria and other agents, safe (and preferably, not wasteful) disposal of body wastes, refuse collection and disposal, control of flies, mosquitoes and other insects, mice, rats and other pests and vermin, quantity, quality and freedom from adulteration or infection of food supplies, including especially such universal and basic foods as bread, milk and meat. Food hygiene concerns not only the home, but also places where food or drink are prepared or consumed, including school

and other canteens, public restaurants, hotels and public houses. The Food Hygiene Regulations 1955 provided welcome new powers for enforcing minimum standards of hygiene in these places. Avoidance of certain adverse habits, such as excessive tobacco smoking or chronic alcoholism is also important.

Some of these matters are reported upon in detail in the Report of the Chief Public Health Inspector, Mr. H. Sharratt, which is incorporated in this Annual Report. Brief comments on the following matters are however made in this section of the report.

1. Housing

As stated in previous reports, within the limits of climate, geography and type of locality, (e.g. agricultural as opposed to industrial or metropolitan areas) probably no other single environmental influence is as important to mental and physical health as good housing. Bad housing, or lack of housing accommodation, overcrowding, living with "in-laws", adjacent to noisy neighbours, over and over again are found to be at the back of people's worries, domestic or occupational, much of which could be alleviated with corresponding improvement to mind and body, if their housing problems could be solved by more people. The extent of the housing problem cannot be measured by the size of the Local Authority's waiting list of applicants for Council Houses or apartments ("flats"), though these are big enough. Many people are living in unsuitable accommodation who have not applied for Council Housing, but at the end of the year there were still 150 actual applications for Council housing on the waiting list, a decrease of 16 as compared with the end of 1958. This is the second year of my period of service as M.O.H. that has not ended with an increase in the waiting list for Council homes in this District. The waiting list in my adjacent Rural District has, however, increased substantially. This is partly due to the need, or desire, to live nearer the employment available in and near Salisbury. In some cases of physically handicapped people the necessary sort of employment can only be obtained in Salisbury or other town.

Overcrowding of the countryside and loss of agricultural land

Please see my Report for 1957, Page 14, Section 1. These observations still apply.

The number of houses in this Rural District slightly decreased during the year, for there were at the end of the year 3,697 inhabited houses, a decrease of 43 over the 3,740 at the end of 1958. With every increase of one or two storeyed housing development there is a corresponding encroachment upon Great Britain's relatively small proportion of agricultural land. It is to be hoped that this matter will be regarded in a national, if not an international, light. It does not appear to be very serious yet in the Mere and Tisbury Rural District, but in so far as this Rural District can help to deal with the national problem it is again recommended that the Council will consider a policy of building upwards.

Improvement Grants

These have continued during the year, after a temporary withdrawal of the scheme in 1958. Forty-six improvement grants in respect of 57 dwellings were made during the year as "Discretionary Grants". A further six "Standard Grants" were made, but the latter only became available in mid-year, when the House Purchase and Housing Act, 1959, came into force. As these standard grants are largely concerned with provision of baths and water closets a substantial increase is to be expected in subsequent years, especially as more public sewage schemes are developed. The amount of work falling on the staff of the Public Health Inspector in connection with these Improvement Grants is very heavy, but their value is great.

Special Housing Needs of Old People

I would like to draw special attention to the remarks of the Chief Public Health Inspector later in this report. Having seen on several occasions the admirable special provision for old people in the Sturminster Rural District, I commend that Council's scheme as an example which has been working well for a decade. Meanwhile the increasing proportion of one floor houses or bungalows, in the Council's future programme will help the old people.

Food Storage

The value of refrigeration for food storage has been given practical support by the Council instituting a scheme for the renting of refrigerators by tenants of their houses.

Slum Clearance

This continues, but the worst cases have been dealt with, and only four houses were demolished during the year as the result of statutory action.

2. Water Supplies

During the year arrangements were concluded for the incorporation of the Council's water supply schemes in the regional grouping to be known as the West Wilts Water Board, to function as from April 1st, 1960. The Council are to be congratulated in acquiring the prolific new source at Maiden Bradley from large springs, formerly owned by the Duke of Somerset, together with the existing distributed mains. This source will be of great augmentation value for the Board's area to the north of this District, as well as within the District.

Out of the 3,740 inhabited houses, 2,296 had, at the end of the year, a piped supply to the house itself, another 53 having a supply to a "standpipe" nearby only. The position is steadily improving as the Council's Comprehensive Water Supply Scheme to cover the District is gradually implemented. So far, only fifteen of the twenty six parishes have fully available water supplied by the Rural District Council.

As regards quality, the results of sampling and bacteriological analyses of the public supplies were all good. Details are set out in the report of the Chief Public Health Inspector.

Chemical analysis of the water from the main source of the Comprehensive Supply at Burton Fields, Mere, while otherwise good, showed that the Fluoride Content of the water is low - varying from 0.08 to 0.6 parts per million, averaging 0.1 part per million, which is only one-tenth of the desirable 1 part per million for promoting the growth of strong, decay-resisting teeth in the formative phases. The fluoride content of the source of the Maiden Bradley (Duke of Somerset's) supply which the Council is buying is much the same as that of the Burton Field source.

Details of chemical, and particularly fluoride, contents of various waters are given in the chemical analysis tables set out in the report of the Chief Public Health Inspector.

The Burton Fields and Maiden Bradley Sources will become the main, indeed, the sole, sources for the whole Rural District. They will also supply parts of adjacent districts. Small Parish supplies are being abandoned, including those of the three parishes, Berwick St. John, East Knoyle (Public Supply portion) and Donhead St. Mary, which have shown fluoride analyses approximate to the optimum of 1 part fluoride per million water. In these areas, the children's teeth have shown a superior quality (as reported in my 1956 Report). Fortification of the Mere and Maiden Bradley sources with extra fluoride salt to bring it up to the quality, for dental purposes, of the three supplies mentioned could be a simple matter, at a cost of about 6d. per head per annum, but still the Ministry of Housing and Local Government are not actively encouraging Water Authorities to supplement insufficient fluoride content of drinking waters, until it, and the Ministry of Health, can demonstrate in this country, the value of this procedure, proven in Canada, the U.S.A. and New Zealand. Meanwhile demonstrations at Watford, Kilmarnock and Anglesey County are continuing. The British Medical Association, The World Health Organisation, the British Dental Association, the Society of Medical Officers of Health, the Canadian Medical Association, and the American Medical Association, support this measure. I believe that there is no public health measure which would do more to improve dental, and therefore other general health so quickly and so cheaply, as enriching fluoride-weak drinking waters.

3. Drainage and Sewerage

Among the five public sewerage systems maintained by the Council, those at Hindon and Zeals were working well, and the new Disposal Works at Tisbury have replaced the antiquated and inefficient old works. Details of this new plant are given in the report of the Chief Public Health Inspector, but in addition the Tisbury sewer system has been extended eastwards to include the Tuckingsmill community. The old works at Mere and Milton, East Knoyle are inadequate and unsatisfactory. Reconstruction of both Mere and East Knoyle plants is urgently necessary, especially at Mere, but the Council did resolve during the year, to instruct their Consulting Engineers to start planning a replacement scheme for the Mere works.

This is undoubtedly now the most urgent sewerage improvement needed in the District, to replace these ancient and grossly over loaded and inefficient sewage Disposal works. The fault of these works is not primarily as a "nuisance" but because they allow pollution of the little River Shreene which departs out of this Rural District shortly after having been mated with and impregnated by the Mere Sewage, to continue her course through the Shaftesbury Rural District, skirting Gillingham on her way.

Negotiations for taking over the private Sewerage Scheme at Maiden Bradley are still in progress. There are small schemes serving a few houses at Berwick St. John and at the United Dairies Depot at Semley, also numerous small sewerage plants serving groups of Council homes in otherwise unsewered areas.

Elsewhere, a small proportion of homes have water closets and baths draining to septic tanks, but most homes still rely on only the unhygienic and inconvenient pail closet. These pail closets are usually outside the house, and used without any disinfecting, deodorising and fly-repelling chemical. The use of a suitable chemical, even in the primitive pail closet, can greatly improve its safety and odour, also reduce the fly nuisance, though, of course, it cannot compare with the convenience of an inside water closet, placed in a bathroom, or if in a separate compartment, with a washbasin in the same compartment.

Drainage into Streams

Occasional cases of pollution by house drainage (mainly sullage water) of small village streams still cause trouble, particularly when the weather is hot and dry, and there is little or no natural flow in the water courses for flushing. This was most marked, as usual, at the Chilmark village stream. The nuisance formerly occurring at Berwick St. Leonard has been dealt with by the provision of adequate anaerobic tank treatment systems for the houses responsible.

4. Refuse Collection and Disposal

Arrangements for disposal places are described in the Chief Public Health Inspector's section of the Report.

A substantial income from salvaged refuse is still obtained. During the year £333. 16. 4. was obtained from sale of waste paper, and £42 from scrap metal, making a total for salvage of £375. 16. 4. A fire occurred in the paper store, £48 being recovered by insurance however.

5. Food Hygiene

Work under the "Clean Food" campaign has been minimal during the year, but it is hoped to develop this important work next year. A useful outline of how this should be done, when the Public Health Inspector Staff have more time, is given in the Chief Public Health Inspector's Report.

Milk: Milk supplies have been generally quite satisfactory during the year. Sampling of milks for analyses by three methods was continued during the year.

The methods were :-

- (1) "Methylene Blue Test", for general cleanliness and keeping quality, for which there were no failures out of 8 samples analysed.
- (2) "Phosphatase Test", for adequacy of heat treatment of "pasteurised" milk, for which there were no failures among 8 samples analysed.
- (3) "Biological Test", which consists of inoculation of a guinea pig, and its subsequent examination after a five or six weeks interval for signs of either tuberculosis or brucellosis. Out of a total of 11 samples taken for biological test, all were negative for tuberculosis and all negative for brucellosis. Last year only 8 samples for Biological analysis were taken, this year's increased number is balanced by the fewer samples for chemical tests, but the biological tests are the more important.

All the analyses on these milks were carried out at the Public Health Laboratory attached to the Salisbury General Infirmary Pathological Department.

Ice Cream, etc.: In regard to other foods, and pursuit of the "clean Food campaign", comments will be formed in the report of the Chief Public Health Inspector. Concerning Ice Cream, however, although the bacteriological safety and hygienic storage conditions are good, it is sad to note how the eating quality of most commercially sold ice cream, which deteriorated in war years, has never recovered.

6. Clean Air

The Clean Air Act contains valuable provisions to enable Local (Air) Authorities to improve the quality of the air within their districts. Fortunately, the Mere and Tisbury Rural District has virtually no problem concerning its air; but the provisions of the Act, and any byelaws made by the Council under the Act, will enable the Council to prevent future pollution. Periodical observations of the type and amount of smoke from the few factory chimneys are made, and no action has been necessary.

7. Meat Inspection

The work done during the year is set out in the report of the Chief Public Health Inspector. The volume of slaughtering within the District is not great at present. But the possible advent of an astronomic increase in bird slaughtering, if the "broiler industry" develops substantially in this District, might bring too heavy a burden on the present Public Health Inspector Staff. However, the additional Public Health Inspector, Mr. Pickup, has now obtained his qualification as a Meat Inspector.

8. Swimming Facilities

Although there are lakes within the District, the rivers are too small or unsafe to provide very satisfactory swimming, especially for learning to swim. A good swimming pool is available outside the District at Frome, and less good ones at Salisbury and Shaftesbury. It is unfortunate that there is no good place for teaching swimming within the Rural District, but I am very glad to know that there is a good prospect of having a swimming pool at Tisbury by 1960, to be situated in the grounds of the proposed new Secondary Modern School, but sponsored by the Tisbury Swimming Pool Society. I have seen the plans of this new pool, which will include a proper continuous filtration and chlorination plant, through the courtesy of my colleague, Dr. Denis B. Kennedy, of Tisbury, to whom thanks are due for the great amount of hard work and enthusiasm he has given to this cause.

I am also very glad to hear from the County Medical Officer of Health and Principal School Medical Officer that a recommendation has been made to the Wiltshire Education Committee that all children should be taught the Holger Neilson method of artificial respiration.

TABLE VII
FACTORIES ACTS, 1937 to 1959

Particulars prescribed by the Ministry of Labour
of the Acts in so far as the Local Authority is concerned

PART I OF THE ACT.

1 - INSPECTIONS for purposes of provisions as to health (including inspections made by Public Health Inspectors)

Premises (1)	Number in Register (2)	Number of Inspections (3)	Written notices (4)	Occupiers prosecuted (5)
(i) Factories in which sections 1,2,3,4, & 6 are to be enforced by Local Authorities	5	6	nil	nil
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	36	25	2	nil
(iii) Other Premises in which Sec. 7 is enforced by the Local Authority (excluding out-workers' premises)	8	8	3	nil
Total	49	39	5	nil

2 - Cases in which DEFECTS were found

(If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more "cases")

Particulars (1)	Number of cases in which defects were found				Number of cases in which prosecutions were instituted (6)
	Found (2)	Remidied (3)	Referred To H.M. Inspector (4)	By H.M. Inspector (5)	
Want of cleanliness (S.1)	Nil	Nil	Nil	Nil	Nil
Overcrowding (S.2)	Nil	Nil	Nil	Nil	Nil
Unreasonable temperature (S.3)	Nil	Nil	Nil	Nil	Nil
Inadequate ventilation (S.4)	Nil	Nil	Nil	Nil	Nil
Ineffective drainage of floors (S.6)	Nil	Nil	Nil	Nil	Nil
Sanitary Conveniences (S.7)					
(a) Insufficient	3	3		3	Nil
(b) Unsuitable or defective ..	2	2		2	Nil
(c) Not separate for sexes	Nil	Nil	Nil	Nil	Nil
Other offences against the Act (not including offences relating to Outwork)	Nil	Nil	Nil	Nil	Nil
Total ..	5	5	-	5	Nil

PART VIII OF THE ACT

Outwork (Sections 110 and 111)

Section 110

Nature of Work (1)	No. of put workers in August list required by Section 110(1)(c)	No. of cases of default in sending lists to the Council	No. of prosecu- tions for failure to supply lists	Section 111		
				(2)	(3)	(4)
Wearing) Making 21		Nil	Nil	Nil	Nil	Nil
apparel) etc.,						
) Cleaning						
) and						
) Washing						

Nature of Work (1)	No. of instances of work in unwholesome premises	No. of Notices served.	Prose cutions
Household Linen			

(1)	(2)	(3)	(4)	(5)	(6)	(7)
Lace, Lace curtains and nets	Nil	Nil	Nil	Nil	Nil	Nil
Curtains and furniture hangings.						
Furniture and upholstery						
Electro-plate						
File making						
Brass and brass articles						
Fur pulling						
Iron and steel cables and chains						
Iron and steel anchors and grapnels						
Cart gear						
Locks, latches and keys						
Umbrellas, etc.						
Artificial flowers						
Nets, other than wire nets						
Tents						
Sacks						
Racquet and tennis balls						
Paper bags						
The making of boxes or other receptacles or parts thereof made wholly or partially of paper						
Brush making						
Pea picking						

(1)	(2)	(3)	(4)	(5)	(6)	(7)
Feather sorting	Nil	Nil	Nil	Nil	Nil	Nil
Carding, etc., of buttons, etc.						
Stuffed toys.						
Basket making						
Chocolates and sweetmeats.						
Cosaques, Christmas stock- ings. etc.,						
Textile weaving						
Lampshades						
Total	21	Nil	Nil	Nil	Nil	Nil

Note: This table is included in the report for the first time this year by request of the Ministry of Health on behalf of the Ministry of Labour.

F. J. G. LISHMAN

8th August, 1960.

MERE AND TISBURY RURAL DISTRICT COUNCIL

ANNUAL REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

Showing Sanitary Circumstances of the Area for
the Year Ended 31st. December, 1959

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my Annual Report for the year 1959.

H. SHARRATT.

Chief Public Health Inspector.

GENERAL INFORMATION

The Mere and Tisbury Rural District comprises twenty six parishes. The two larger parishes of Mere and Tisbury are urban in character providing day to day shopping facilities for the surrounding parishes.

The district is mainly agricultural in it's pursuits with one or two small industries, e.g. Brush Factory at Mere. Discussions continued on a proposal to establish a Chicken Slaughtering Establishment in Mere and Outline Planning Permission was given for a site at Woodlands Road, Mere. The Company has not yet made a final decision to proceed with the erection of the Factory.

SANITARY INSPECTIONS OF THE AREA

Public Health Act, 1936 and General Sanitation

Number of Inspections	re: Water Supply	..	..	83
" "	" to take Water Samples	..	..	52
" "	" re: Water Cress	..	..	11
" "	" re: Pollution of Water Courses	..	..	20
" "	" re: Drainage and/or Sanitary Accommodation	..	..	208

Number of Inspections	re: Miscellaneous Complaints	..	..	31
"	re: Infectious Diseases	..	..	16
"	re: Infestations	..	..	8
"	re: Verminous or filthy premises	..	..	18
"	re: Moveable Dwellings (Sec.269)	..	..	28
"	re: Meat Inspection	..	..	20
"	to take milk samples	..	..	17
"	re: Aged and Infirm Persons	..	..	7
"	under Factories Act	..	..	39
"	re: Outworkers	..	..	21
"	re: Means of Escape in Case of Fire			
	Sec. 60 Public Health Act, 1936.			6

Housing

Number of Inspections and Visits under Housing Act, 1957, Housing (Financial Provisions) Act, 1958 and House Purchase and Housing Act, 1959

HOUSTON

The improvement of existing houses is a major part of the work of the Public Health Staff. There seems to be no sign of abatement in the number of applications for Discretionary Grants but the number of Standard Grants applied for is low.

The Council are proposing to erect more bungalows in Mere, Tisbury and Donhead St. Mary which will, in addition to providing accommodation for older people, release the larger houses for re-housing.

Modernisation of the Council's pre-war houses continued with a further 16 houses completed at Tisbury.

Tenants of Council Houses may now rent refrigerators following the Council's decision to make this service available.

The Slum Clearance Programme for the first five years is virtually complete and the final check for further unfit houses will be carried out in the coming year.

HOUSING STATISTICS FOR 1959

1. Number of permanent dwellings in district at end of year	3845
2. Number of permanent dwellings in district owned by local authority	609
3. Number of temporary dwellings in district owned by local authority	Nil
4. Number of applications for Council houses at end of year	160

5. Inspections of dwellings during year :

(i)	Inspected for housing defects under Public Health Acts	26
(ii)	Inspected for housing defects under Housing Acts	128
(iii)	Number of dwellings so dangerous or injurious to Health as to be unfit for habitation	3
(iv)	Number of dwellings found not to be in all respects reasonably fit for habitation	87

6. Number of dwellings rendered fit in consequence of informal action 76

7. Action under Statutory Powers

A. Proceedings under sections, 9,10,12 Housing Act, 1957.

(i)	Number of dwellings where notices were served requiring defects to be remedied	Nil
(ii)	Number of dwellings rendered fit after service of formal notices	
(a)	By owners	Nil
(b)	By local authorities in default of owners	Nil

B. Proceedings under Public Health Acts.

(i)	Number of dwellings where formal notices were served	Nil
(ii)	Number of dwellings made fit as result of formal notices	
(a)	By owners	Nil
(b)	By local authorities in default of owners	Nil

C. Proceedings under Section 16, Housing Act, 1957.

(i)	Number of demolition Orders made	2
(ii)	Number of houses demolished as result of demolition Orders	4
(iii)	Number of undertakings accepted	1
(iv)	Number of undertakings completed	3

D. Proceedings under Sections 42, 43, 46, 48 Housing Act, 1957.

(i)	Number of houses in clearance areas upon which demolition Orders were made	Nil
(ii)	Number of houses demolished as result of demolition Orders	Nil
(iii)	Number of houses in clearance areas which have been retained as temporary accommodation	Nil

E. Proceedings under Sections 17, 18, 27, Housing Act, 1957.

(i)	Number of dwellings where closing Orders were made	Nil
(ii)	Number of dwellings closed as result of closing Orders or undertakings by owners	Nil
(iii)	Number of dwellings where closing Orders were cancelled in consequence of premises being made fit	Nil

F. Proceedings under Section 76, Housing Act, 1957.

(i) Number of cases of overcrowding at end of year	Nil
(ii) Number of cases of overcrowding discovered during year	Nil
(iii) Number of cases of overcrowding abated during year	1

Houses erected or converted during year :

1st January, 1959 to 31st December, 1959	Houses erected during year	For slum clearance	For other purposes	Gained from conversion of large houses into flats or dwellings	Lost from conversion of two or more houses into one
Local Authority	Nil	Nil	Nil	Nil	Nil
Private Enterprise	-	21	34	Nil	

HOUSE PURCHASE AND HOUSING ACT, 1959

This Act, introduced as a further stage in the development of the policy of encouraging home ownership and raising housing standards, came into operation on the 14th June, 1959. It introduced a new system of "Standard Grants" to supplement the present system of "Improvement Grants" and made certain changes in the latter to simplify its operation and render grants more attractive. The extension of the scheme to cover improvements to local authorities own houses is welcome.

The following table gives information on the Council's activities in this sphere but figures give little indication of the amount of time devoted to this important work with site meetings, examination of schemes, checking of estimates, inspections during construction and, in the case of Standard Grants, the examination of accounts on completion.

As previously mentioned applications for Standard Grants are only slowly coming in. This type of Grant is not so suitable in a Rural Area where sewers are not always available and where the incorporation of the standard amenities within the existing structure is frequently impossible owing to the limited accommodation available.

DISCRETIONARY GRANTS MADE UNDER THE HOUSING (FINANCIAL PROVISIONS) ACT, 1958 AND THE HOUSE PURCHASE AND HOUSING ACT, 1959

Number of Applications and Houses dealt with by the Local Authority :-

(1)	(2)	(3)	(4)	(5)						
Received	Approved	Rejected	Under consideration	Withdrawn						
Apps.	No. of Houses	Apps.	No. of Houses	Apps.	No. of Houses	Apps.	No. of Houses			
1. 1. 59 to 31.12.59	47	58	46	57	1	1	Nil	Nil	2	2

Number of houses improved during 1959 as result of Grants : 50

Value of Grants made during 1959 : £17,182.

STANDARD GRANTS MADE UNDER THE HOUSE PURCHASE AND HOUSING ACT 1959.

Amenities to be provided

Applications Received	Applications Approved	Bath	Wash-basin	Hot Water Supply	Water Closet	Larder	Value of Grant.
6	6	4	4	3	6	4	not exceeding £625

RENT ACT, 1957

Only three applications have been made for Certificates of Disrepair since the Act came into operation. In one case a Certificate was granted and the owner carried out the works necessary. No applications for cancellation have yet been received.

Applications for Certificates of Disrepair	1
Certificates issued	1
Undertakings to effect repairs accepted	Nil
Applications for cancellation of Certificate	Nil
Certificates cancelled	Nil
Inspections	4

MOVEABLE DWELLINGS

The questionnaire circulated by Sir Arton Wilson for his investigation into the use of Caravans as homes was completed. There is only one licensed Caravan Site in the District situated at Donhead St. Mary adjoining the A.30 road. There are four residential caravans on this site. Sanitary accommodation for males and females is provided with septic tank drainage.

There has been no demand for a site to be operated by the Council.

Moveable Dwellings do not present a major problem in the Mere and Tisbury Rural District. During the year 23 inspections of sites and caravans were carried out.

NUISANCES

Public Health Acts

Complaints investigated ..	..	..	..	73
Number of Informal Notices served during the year	..	..	..	11
Number of Informal Notices complied with	..	..	..	11

RODENT CONTROL

Complaints of Rodent Infestation are investigated and treatments carried out. These mostly involve domestic premises as former personnel of the Agricultural Executive Committee contract to the farmers.

Regular sewer baiting is carried out at Mere, Zeals, Tisbury and Hindon showing satisfactory results. Refuse tips are frequently treated.

Number of Properties inspected by the Local Authority during 1959 :-

	Local Authority	Domestic	General Business	Farm
No. of Properties Surveyed	9	367	31	41
No. of Inspections made	45	462	56	45
Treatments Carried out	6	51	3	1
Notices served under Sec. 4	Nil	Nil	Nil	Nil

WATER SUPPLY

The Comprehensive Water Scheme is entering the final stages. Reservoirs are under construction at Hindon - 65,000 gallons, Milton, East Knoyle - 150,000 gallons and Donhead - 140,000 gallons. A Break Pressure Tank of 2,000 gallons is under construction at Berwick St. John. The reservoirs at Hatch, Tollard Royal and Berwick St. John are not yet under construction.

Part V of the Scheme was commenced and main laying is in progress at Maiden Bradley, Kilmington, Rushmore and Tollard Royal.

The Maiden Bradley Estate Water Supply was taken over by the Council on the 1st April and connection to the Mere supply will shortly be effected.

The West Wilts Water Board Order 1959 sets April 1st, 1960 as the day on which the Board will take over the Council's Water Undertaking

Number of houses supplied from Public sources in villages :-

PARISH	DIRECT		BY STANDPIPE	
	No. of Houses	Population (approx)	No. of Houses	Population (approx)
Ansty . . .	4	15	-	-
Berwick St. John . .	94	285	-	-
Chilmark . . .	101	302	5	12
Donheads . . .	435	1163	-	-
East Knoyle . . .	172	516	-	-
Fonthill Gifford . . .	2	8	-	-
Hindon . . .	198	490	8	22
Kilmington . . .	68	238	-	-
Maiden Bradley . . .	132	196	-	-
Mere . . .	683	2250	-	-
Sedgehill . . .	24	123	-	-
Semley . . .	38	133	-	-
Stourton . . .	14	49	-	-
Sutton Mandeville . . .	8	21	-	-
Swallowcliffe . . .	46	148	-	-
Teffont . . .	78	230	40	90
Tisbury . . .	536	1717	-	-
Tollard Royal . . .	1	4	-	-
West Knoyle . . .	40	130	-	-
West Tisbury . . .	58	174	-	-
Zeals . . .	151	440	-	-
	<hr/>	<hr/>	<hr/>	<hr/>
	2883	8632	53	124
	<hr/>	<hr/>	<hr/>	<hr/>

The following data dealing with Bacteriological Analysis is submitted in accordance with Circular 13/47 Ministry of Health.

ANALYSES OF WATER SUPPLIES (BACTERIOLOGICAL)

(a) Public Supplies

Parish	No. of samples taken	No. satisfactory	No. unsatisfactory
Mere . . .	4	4	-
Tisbury . . .	4	4	-
Donhead . . .	4	4	-
Berwick St. John	4	4	-
East Knoyle . .	4	4	-
Teffont . . .	4	4	-

(b) Private Sources

Number of samples taken during year ..	..	..	40
Number satisfactory .. . . .	..	..	33
Number unsatisfactory .. . . .	..	..	7

Necessary action was taken to trace the source of pollution, chlorination and cleaning out of the wells being carried out where considered necessary. In respect of the Pythouse supply the existing supply was discontinued and water obtained from the Council's mains.

ANALYSES OF WATER SUPPLIES (CHEMICAL)

Chemical Analyses were taken from the Maiden Bradley Source and from the Mere Source at Burton Fields.

	Maiden Bradley Source	Mere Public Supply Burton Fields
Physical Characters	Clear and colourless no deposit.	Slightly opalescent with brown deposit
		parts per million
Reaction pH	7.1	7.4
Saline and free Ammonia	Nil	0.16
Organic (or albuminoid) Ammonia	Nil	0.01
Oxygen absorbed from permanganate in two hours at 270°C.	0.03	0.03
Chlorides	14	14
Nitrates (nitric oxygen)	5	nil
Total Hardness	205	145
(a) Temporary	150	103
(b) Permanent	55	42
Metals	Nil	Nil
Nitrites	Nil	Nil

WATER SAMPLES - FLUORIDE CONTENT

Identification	Fluoride Content
Mere	0.1 p.p.m. (Modified Test)
Maiden Bradley . . .	0.5 p.p.m. (" ")
East Knyle (Hallett's supply) .	0.1 p.p.m. (" ")
Teffont	0.2 p.p.m. (" ")
Chilmark	0.5 p.p.m. (" ")
Alvediston (Sykes Supply) .	0.7 p.p.m. (" ")
Fonthill Bishop (Fonthill Estates Supply) .	0.1 p.p.m. (" ")
Wilts. County Council Supply	
Norton Ferris, Kilmington .	0.5 p.p.m. (" ")

WATERCRESS BEDS

Six routine samples were taken from cress beds in the district. Facilities for the washing of cress are being installed at the packing sheds.

SEWERAGE AND SEWAGE DISPOSAL WORKS

With the exception of five parishes sewage disposal in the district is by septic tank, cesspool or pail closet. The Council does not operate a Cesspool Emptying Service, the area being well served by private contractors.

The completion of the Comprehensive Water Supply with increased applications for waterborne sanitation is accentuating the need for further sewerage schemes, particularly in the parishes of East Knoyle and Semley. Berwick St. John, Kilmington and Chilmark, with polluted streams running through the village, must also be considered.

Tisbury

The new Sewage Disposal Works and Sewers were completed this year. Sewage gravitates to the works from the greater part of the village. The sewage from Tuckingmill, some 45 houses, and from the School in Church Road is raised by Ejector to the main sewer. The sewage is then raised in the works, by Vertical Spindle Pumps, to sedimentation tanks from whence it gravitates through percolating filters and humus tanks to the river Nadder.

One man is in attendance for four days per week. During the year, following the provision of free laterals to the boundaries of premises, 73 houses were connected to the sewer and I record the efforts made by Mr. J. C. Pickup who has been largely responsible for the speed at which this work has been carried out and the help and advice he has given to houseowners.

Hindon

These works, completed in 1954, continue to function in a satisfactory manner. The scheme is gravitational to the pumping station where sewage is lifted to high level then gravitates through the works to final disposal by land irrigation.

An attendant works here two days per week with regular visits from mobile staff.

New connections to sewers	Nil
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Zeals

The system is an adaptation of the scheme installed for the use of Zeals Aerodrome and taken over by the Council at the end of the war.

The Sewage Disposal Works are situated in the neighbouring Rural District. The works continue to function in a satisfactory manner.

New connections to sewers 3

Mere

The Council resolved to press ahead with the preparation of plans for the new Sewage Disposal Works and the relaying of sewers in Mere.

The condition of the Mere Sewage Works remains unchanged, virtually no treatment, other than partial retention of solids, is possible. The sewers are surcharged with spring water and the re-laying of certain sections is imperative.

New connections to sewers 1

East Knoyle (Milton)

This small works caters for some 34 cottages and consists solely of an open tank with disposal of effluent by irrigation. There is a need for a small disposal plant here or alternatively disposal by connection to future works provided for the village of East Knoyle. Complaints are received periodically of excessive weed growth on this site caused in the main by the flooding of the irrigation area with surface water.

New connections to sewers Nil

PRIVATE SCHEMES

Maiden Bradley

Following representations from the Maiden Bradley Estate that the Council should take over the responsibility of maintaining the existing private sewerage works the Council resolved to take over the existing system. The Council further instructed Consulting Engineers to go ahead with the preparation of plans for a new Sewage Disposal Works and extension to the existing sewers.

PUBLIC CLEANSING

Household and Trade Refuse

The organised collection of refuse is carried out once per calendar month in the smaller parishes and twice per calendar month at Mere and Tisbury. No charge is made for trade refuse.

Consideration was given to a proposal to increase the frequency of collection of refuse to weekly within the lighting area of Mere and Tisbury

and fortnightly to other parishes. The general opinion within the District was that the existing scheme is adequate. In order to maintain the existing collection at its present level it has been necessary to increase the staff by a further driver/loader from 1st January, 1960 and, with the introduction of a $42\frac{1}{2}$ hour week for employees in January, 1961, it may well be necessary to further increase the number of loaders and re-examine the schedule of collections.

Disposal

The disposal of refuse is to dumps situated in various parts of the district, namely Ansty, Pertwood, Maiden Bradley and Sans Lane, Donhead St. Andrew. The difficulty of finding adequate covering down material continues. Approximately 70 tons of soil were carted for this purpose.

Number of loads collected	.	.	.	.	742
Approximate tonnage	.	.	.	.	1827
Miles run during the year	.	.	.	.	15203

SALVAGE

The amount of salvage collected was down on the previous year and consequently with the price of baled paper down £1. per ton to £6. 3. 0. receipts are lower by approximately £160. 0. 0. It is anticipated that the price of paper collected free from the Salvage Yard will remain steady during the coming year and with increased labour the revenue should again increase.

	Tons.	Cwts.	Qrs.	Value:	£.	s.	d.
Waste paper baled							
	6.	9.	3.		40.	10.	11.
	7.	10.	2.		47.	0.	7.
	8.	0.	0.		50.	0.	0.
	6.	4.	0.		38.	15.	0.
	5.	6.	3.		33.	7.	2.
	4.	2.	2.		25.	15.	7.
	5.	17.	2.		36.	14.	4.
	4.	8.	2.		27.	13.	1.
	5.	8.	3.		33.	19.	8.
	<hr/>	<hr/>	<hr/>		<hr/>	<hr/>	<hr/>
	53.	8.	1.		333.	16.	4.
Insurance payment following destruction of baled paper by fire.							
					48.	0.	0.
Scrap Metal.	9.	10.	2.		42.	0.	0.
	<hr/>	<hr/>	<hr/>		<hr/>	<hr/>	<hr/>
Total :	62.	18.	3.		423.	16.	4.
	<hr/>	<hr/>	<hr/>		<hr/>	<hr/>	<hr/>

LITTER ACT, 1958

Litter bins are installed at various points throughout the District and are cleared by the Refuse Collectors. A further clearance is made every Saturday of the holiday season in an effort to encourage the use of receptacles. The Wiltshire County Council Highways Department co-operate with the provision of litter bins on laybys. The problem increases year by year.

PUBLIC CONVENIENCES

Public Conveniences for Males and Females are provided in Mere and Tisbury.

The accommodation at Tisbury is adequate but at Mere is hardly sufficient having regard to the increase in the travelling public using the A. 303. With negotiations for a Car Park proceeding it is hoped that provision will be made for new Public Conveniences.

The fouling of the laybys and verges along the main London/Exeter road increases each year and the provision of sanitary accommodation at popular pull-ins may have to be considered.

INSPECTION AND SUPERVISION OF FOOD

Food Hygiene Regulations 1955

Number of Inspections made : 84.

Number of Food Premises by type in the area :-

Public Houses, Hotels	..	..	..	..	..	..	..	..	..	37
Grocery Stores	..	..	..	..	..	..	..	..	..	51
Fishmongers	..	..	..	..	..	..	..	..	..	2
Butchers' Shops	..	..	..	..	..	..	..	..	..	6
Cafes	..	..	..	..	..	..	..	..	..	11
Hospitals and Institutions	..	..	..	..	..	..	..	..	..	3
Parish Halls, Clubs, Sweet Shops, etc.	..	..	..	..	..	..	..	..	..	17
Schools	..	..	..	..	..	..	..	..	..	15

Number of Food Premises registered under Section 16, Food and Drugs Act, 1955 :-

1. Preparation or Manufacture of Sausages 6
2. Sale or Preparation of Cooked Meats 15

There were no prosecutions during the year.

CLEAN FOOD CAMPAIGN

The Mere and Tisbury Rural District is sparsely populated and the promotion of Clean Handling of Food has to be by the slow process of individual education.

<u>Headings</u>	<u>Activities</u>
1. Lectures or Classes for Food tradesmen and their employees	None. Advice to individuals and leaflets.
2. Exhibitions.	None.
3. Lectures etc. for General Public including Women's organisations.	Occasional Lectures.
4. Formation of Clean Food Guild	None.
5. Formation of Local Codes of Practice.	None.
6. Any other relevant activities.	Documentary Films at two local cinemas and the exhibition of posters by the Public Health Department.

MILK SUPPLIES

Supplies of milk have been generally satisfactory throughout the year both in quality and quantity.

No complaints of any kind have been received from consumers.

Routine inspections are made of milk roundsmen's vans during the course of milk delivery.

Samples taken during 1959 :-

	METHYLENE BLUE		BIOLOGICAL	
	PASS	FAIL	NEGATIVE	POSITIVE
Designated Raw Milk	8	0	11	0
			TUB.	BRUCELLA.
Pasteurised	8	0	1	-
			-	-

It will be noted that samples taken of milk supplied to the public in this area were free from Tuberculosis and Brucella.

The Milk (Special Designations) (Specified Areas) No. 2 Order, 1957 included the Mere and Tisbury Rural District and came into operation on the 1st October, 1958.

PREMISES REGISTERED

Producer Retailers	..	..	..	8
Dairies (not being Dairy Farms)	..	..	..	3
Distributors	..	..	..	6

LICENCES

Dealers Licence to use Special Designation "Tuberculin Tested"	6
Supplementary Licence to use Special Designation "Tuberculin Tested"	4
Dealers Licence to use Special Designation "Pasteurised"	4
Supplementary Licence to use Special Designation "Pasteurised"	4

The Milk and Dairies (General) Regulations, 1959 came into operation on the 8th March, 1959. One of the principal changes made is that "Distributors" are now required to be registered only with the local authority in whose area the premises from which the milk is distributed are situated.

ICE CREAM

No Ice Cream is manufactured in the District. As in previous years supplies are obtained direct from wholesale firms and are retailed in cartons or wrappers.

No cases of illness from the consumption of this food was reported.

Six samples of Water Ices were taken for estimated of PH value.

Premises registered for the Sale of Ice Cream 40

FOOD CONDEMNED

The undermentioned foodstuffs were condemned as unfit for human consumption :-

183 lbs. Hindquarter Beef - Bone taint.

61 lbs. Stewed Beef.

1 Oven Ready Roasting Chicken.

Sampling under the Food and Drugs Act is carried out by the Wiltshire County Council.

MEAT INSPECTION

Private Slaughterhouses

There are two private slaughterhouses in the district licensed until 1960. The preparation of the Slaughterhouses Report as required under Section 2 of the Slaughterhouses Act was commenced. Neither of the two slaughterhouses comply completely with the Regulations governing Hygiene in Slaughterhouses or Slaughter of Animals (Prevention of Cruelty) and discussions will be held during 1960 to ascertain whether the owners are prepared to spend the money necessary to make the premises comply.

In both cases the slaughtering is for own consumption and supplements the major supply obtained through the Fatstock Marketing Corporation.

Carcases Inspected and Condemned in 1959

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number Killed	52	26	1	nil	6
Number inspected	52	26	1	nil	6

All Diseases except Tuberculosis :-

Whole carcases condemned	nil	nil	1	nil	nil
Carcases of which some part or organ was condemned	11	5	nil	nil	2

Cont'd	Cattle excluding Cows	Cows	Calves	Sheep and Pigs Lambs
Tuberculosis Only -				
Whole carcasses condemned	nil	nil	nil	nil nil
Carcasses of which some part or organ was condemned	nil	nil	nil	nil nil
C. Bovis.				
Carcasses of which some part or organ was condemned	2	nil	nil	- -
Carcasses submitted to treatment by refrigeration	2	nil	nil	- -

SLAUGHTER OF ANIMALS ACT, 1933 - 1954

Number of renewals of Licences issued to Slaughtermen : 8

Number of New Licences issued to Slaughtermen : Nil

DISEASES OF ANIMALS (WASTE FOODS) ORDER 1957

The Wiltshire County Council have delegated their functions under this Order to District Councils and the Public Health Inspector is authorised to act as Inspector of the Local Authority under the 1950 Act for the purpose of executing and enforcing the provisions of the Order.

No. of premises licensed	Premises where swill is boiled for resale	Types of Boiling Plant Elect/ Gas	Types of Boiling Plant Coal/ Wood	Breaches of Order detected
3	Nil	1	2	Nil

FOOD POISONING

No cases of food poisoning were reported during the year.

CLEAN AIR ACT, 1956

No action was necessary during 1959 to abate air pollution.

FACTORIES
Factories Acts, 1937 and 1948

INSPECTIONS

Premises	Number on Register	Number of Inspections	Number of Written Notices	Number of Occupiers Prosecuted
(i) Factories in which Sections 1,2,3,4, & 6 are to be enforced by Local Authority.	5	6	nil	nil
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	36	25	2	nil
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding outworker's premises).	8	8	3	nil
Total	49	39	5	nil

CASES IN WHICH DEFECTS WERE FOUND AT FACTORIES

Particulars	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred to H.M. Inspector	Referred by H. M. Inspector	
Section 7- Sanitary Conveniences					
(a) Insufficient	3	3		3	
(b) Unsuitable or defective	2	2		2	
Total	<u>5</u>	<u>5</u>		<u>5</u>	

OUTWORKERS

Section 110, Factories Act 1937

Nature of work	No. of outworkers in August list required by Sec.110(1)(c)(3)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists
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WEARING APPAREL :

Making etc. Cleaning and Washing	21	Nil	Nil
Total	<u>21</u>	<u>Nil</u>	<u>Nil</u>

RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951

There are no premises requiring Licensing or Registering under the above Act.

H. SHARRATT

Chief Public Health Inspector

